

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF TEXAS

Case number (if known): _____ Chapter you are filing under:

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

David

First Name

Austin

Middle Name

Hardwick

Last Name

Suffix (Sr., Jr., II, III)

Charissa

First Name

Danee

Middle Name

Hardwick

Last Name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

First Name

Middle Name

Last Name

First Name

Middle Name

Last Name

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 6 5 5 3

OR

9xx - xx - _____

xxx - xx - 5 9 0 8

OR

9xx - xx - _____

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

☒ I have not used any business names or EINs.

☒ I have not used any business names or EINs.

Business name _____

Business name _____

Business name _____

Business name _____

Business name _____

Business name _____

EIN _____

EIN _____

EIN _____

EIN _____

5. Where you live

If Debtor 2 lives at a different address:

206 N. Morrow Street

Number Street

Number Street

Blue Ridge TX 75424

City State ZIP Code

City State ZIP Code

Collin

County

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

Number Street

P.O. Box

P.O. Box

City State ZIP Code

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☒ Chapter 7

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

8. How you will pay the fee ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.
9. Have you filed for bankruptcy within the last 8 years? ☒ No
- ☐ Yes.
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? ☒ No
- ☐ Yes.
- Debtor _____ Relationship to you _____
- District _____ When _____ Case number, _____
MM / DD / YYYY if known
- Debtor _____ Relationship to you _____
- District _____ When _____ Case number, _____
MM / DD / YYYY if known
11. Do you rent your residence? ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

- ☒ No. Go to Part 4.
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

Name of business, if any

Number Street

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

City

State

ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a *small business debtor*?

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- ☒ No. I am not filing under Chapter 11.
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

- ☒ No
☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:
You must check one:

☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):
You must check one:

☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

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☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

- 16. What kind of debts do you have?**
- 16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.
☒ Yes. Go to line 17.
- 16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.
☐ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer or business debts.
-
- 17. Are you filing under Chapter 7?**
- ☐ No. I am not filing under Chapter 7. Go to line 18.
- ☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☒ No
☐ Yes
- 18. How many creditors do you estimate that you owe?**
- | | | |
|-------------------------------------------|----------------------------------------|--------------------------------------------|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |
- 19. How much do you estimate your assets to be worth?**
- | | | |
|---------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |
- 20. How much do you estimate your liabilities to be?**
- | | | |
|---------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ David Austin Hardwick
David Austin Hardwick, Debtor 1

Executed on **03/31/2020**
MM / DD / YYYY

X /s/ Charissa Danee Hardwick
Charissa Danee Hardwick, Debtor 2

Executed on **03/31/2020**
MM / DD / YYYY

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X /s/ David S. Kohm _____

Signature of Attorney for Debtor

Date **03/31/2020**

MM / DD / YYYY

David S. Kohm _____

Printed name

David S Kohm _____

Firm Name

1414 W. Randol Mill Rd., Suite 118 _____

Number Street

Arlington _____

City

TX _____

State

76012 _____

ZIP Code

Contact phone **(817) 861-8400** _____

Email address **michaelb@attorneykohm.com** _____

11658563 _____

Bar number

TX _____

State

Fill in this information to identify your case and this filing:

| | | | |
|--------------------------------------------------------------------------|-----------------|---------------|-----------------|
| Debtor 1 | David | Austin | Hardwick |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | Charissa | Danee | Hardwick |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

1.1.

714 Prospect Street

Street address, if available, or other description

Leavenworth KS 66048-3271

City State ZIP Code

Leavenworth, Kansas

County

Rent House

Legal: S35, T08, R22E, PT SE1/4 Beg at SE Cor LT 7 Blk 3 Bluettinger's 2nd, N107', E38', S107', W38', & Also TR Beg SE Cor Lt 24, Shoyer PL Sub, W44', N138.5', E44', S138.5' to Pob

What is the property?

Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another _____

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$93,500.00

Current value of the portion you own?

\$93,500.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple Owner

☒ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

\$93,500.00

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

| | | | | |
|--------------------------------------------------|------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| 3.1. | | Who has an interest in the property? | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> . | |
| Make: | <u>Chrysler</u> | Check one. | | |
| Model: | <u>200C</u> | <input type="checkbox"/> Debtor 1 only | Current value of the entire property? | Current value of the portion you own? |
| Year: | <u>2015</u> | <input type="checkbox"/> Debtor 2 only | | |
| Approximate mileage: | <u>99,000</u> | <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only | <u>\$5,000.00</u> | <u>\$5,000.00</u> |
| Other information: | | <input type="checkbox"/> At least one of the debtors and another | | |
| 2015 Chrysler 200C (approx. 99,000 miles) | | <input checked="" type="checkbox"/> Check if this is community property (see instructions) | | |

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

\$5,000.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe..... **See continuation page(s).**

\$610.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe..... **See continuation page(s).**

\$450.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe..... **Bowling Equipment**

\$60.00

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

Clothes

\$20.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.....

Jewelry

\$400.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☒ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....

\$1,540.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No

☐ Yes..... Cash:

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes.....

Institution name:

17.1. Checking account: **USAA Checking account # 0937-1** **\$0.60**

17.2. Savings account: **Navy FCU Membership Savings account # 8485** **\$0.00**

17.3. Savings account: **USAA Savings account # 4379-8** **\$0.00**

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No
☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- ☒ No
☐ Yes. Give specific information about them..... Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No
☐ Yes. Give specific information about them..... Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☐ No
☒ Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan: **401(k)** **\$242.39**

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No
☐ Yes..... Institution name or individual:

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)

- ☒ No
☐ Yes..... Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No
☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- ☒ No
☐ Yes. Give specific information about them

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific information about them

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No
☐ Yes. Give specific information about them

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

- ☒ No
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: _____
State: _____
Local: _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No
☐ Yes. Give specific information

Alimony: _____
Maintenance: _____
Support: _____
Divorce settlement: _____
Property settlement: _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No
☐ Yes. Give specific information

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No
☐ Yes. Name the insurance company of each policy and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

- ☒ No
☐ Yes. Give specific information

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No
☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- ☒ No
☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

- ☒ No
☐ Yes. Give specific information

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... → **\$242.99**

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☒ No
☐ Yes. Describe.. _____

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No
☐ Yes. Describe.. _____

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☒ No
☐ Yes. Describe.. _____

41. Inventory

- ☒ No
☐ Yes. Describe.. _____

42. Interests in partnerships or joint ventures

- ☒ No
☐ Yes. Describe..... Name of entity: _____ % of ownership: _____

43. Customer lists, mailing lists, or other compilations

- ☒ No
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
☐ No
☐ Yes. Describe.... _____

44. Any business-related property you did not already list

- ☒ No
☐ Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... → **\$0.00**

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

47. **Farm animals**

Examples: Livestock, poultry, farm-raised fish

- ☒ No
☐ Yes....

48. **Crops--either growing or harvested**

- ☒ No
☐ Yes. Give specific
information.....

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☒ No
☐ Yes....

50. **Farm and fishing supplies, chemicals, and feed**

- ☒ No
☐ Yes....

51. **Any farm- and commercial fishing-related property you did not already list**

- ☒ No
☐ Yes. Give specific
information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... →

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... →

\$0.00

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 8: List the Totals of Each Part of this Form

| | | |
|-----------------------------------------------------------------------|------------------------------|------------------------------------------------------|
| 55. Part 1: Total real estate, line 2..... | → | <u>\$93,500.00</u> |
| 56. Part 2: Total vehicles, line 5 | <u>\$5,000.00</u> | |
| 57. Part 3: Total personal and household items, line 15 | <u>\$1,540.00</u> | |
| 58. Part 4: Total financial assets, line 36 | <u>\$242.99</u> | |
| 59. Part 5: Total business-related property, line 45 | <u>\$0.00</u> | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | <u>\$0.00</u> | |
| 61. Part 7: Total other property not listed, line 54 | <u>+\$0.00</u> | |
| 62. Total personal property. Add lines 56 through 61..... | <div><u>\$6,782.99</u></div> | Copy personal property total → <u>+\$6,782.99</u> |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62..... | | <div><u>\$100,282.99</u></div> |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

6. Household goods and furnishings (details):

| | |
|--------------------------|-----------------|
| Stove | \$50.00 |
| Microwave | \$10.00 |
| Refrigerator | \$50.00 |
| Washing Machine | \$200.00 |
| Dryer | \$200.00 |
| Bedroom Furniture | \$100.00 |

7. Electronics (details):

| | |
|--------------------|-----------------|
| TV | \$100.00 |
| Stereo | \$50.00 |
| Computer | \$200.00 |
| Game System | \$100.00 |

Fill in this information to identify your case:

| | | | |
|--------------------------------------------------------------------------|-----------------|---------------|-----------------|
| Debtor 1 | David | Austin | Hardwick |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | Charissa | Danee | Hardwick |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS | | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|--------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| | Copy the value from <i>Schedule A/B</i> | Check only one box for each exemption | |
| Brief description: Microwave Line from <i>Schedule A/B</i> : <u>6</u> | <u>\$10.00</u> | <input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |
| Brief description: Refrigerator Line from <i>Schedule A/B</i> : <u>6</u> | <u>\$50.00</u> | <input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption | Specific laws that allow exemption |
|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| Brief description: Washing Machine Line from Schedule A/B: <u>6</u> | <u>\$200.00</u> | <input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |
| Brief description: Dryer Line from Schedule A/B: <u>6</u> | <u>\$200.00</u> | <input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |
| Brief description: Bedroom Furniture Line from Schedule A/B: <u>6</u> | <u>\$100.00</u> | <input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |
| Brief description: TV Line from Schedule A/B: <u>7</u> | <u>\$100.00</u> | <input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |
| Brief description: Stereo Line from Schedule A/B: <u>7</u> | <u>\$50.00</u> | <input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |
| Brief description: Computer Line from Schedule A/B: <u>7</u> | <u>\$200.00</u> | <input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |
| Brief description: Game System Line from Schedule A/B: <u>7</u> | <u>\$100.00</u> | <input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |
| Brief description: Bowling Equipment Line from Schedule A/B: <u>9</u> | <u>\$60.00</u> | <input checked="" type="checkbox"/> <u>\$60.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |
| Brief description: Clothes Line from Schedule A/B: <u>11</u> | <u>\$20.00</u> | <input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Kan. Stat. Ann. § 60-2304(a) |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Additional Page

**Brief description of the property and line on
Schedule A/B that lists this property**

**Current value of
the portion you
own**

**Amount of the
exemption you claim**

Specific laws that allow exemption

Copy the value from
Schedule A/B

Check only one box for
each exemption

Brief description:
Jewelry

\$400.00

☒ **\$400.00**
☐ 100% of fair market
value, up to any
applicable statutory
limit

Kan. Stat. Ann. § 60-2304(b)

Line from Schedule A/B: **12**

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION**

IN RE: **David Austin Hardwick
Charissa Danee Hardwick**

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

| No. | Category | Gross Property Value | Total Encumbrances | Total Equity | Total Amount Exempt | Total Amount Non-Exempt |
|-----|----------------------------------------------------------|-------------------------|-----------------------|-----------------|------------------------|----------------------------|
| 1. | Real property | \$93,500.00 | \$83,425.03 | \$10,074.97 | \$0.00 | \$10,074.97 |
| 3. | Motor vehicles (cars, etc.) | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 4. | Water/Aircraft, Motor Homes, Rec. veh. and access. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 6. | Household goods and furnishings | \$610.00 | \$0.00 | \$610.00 | \$560.00 | \$50.00 |
| 7. | Electronics | \$450.00 | \$0.00 | \$450.00 | \$450.00 | \$0.00 |
| 8. | Collectibles of value | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 9. | Equipment for sports and hobbies | \$60.00 | \$0.00 | \$60.00 | \$60.00 | \$0.00 |
| 10. | Firearms | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11. | Clothes | \$20.00 | \$0.00 | \$20.00 | \$20.00 | \$0.00 |
| 12. | Jewelry | \$400.00 | \$0.00 | \$400.00 | \$400.00 | \$0.00 |
| 13. | Non-farm animals | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 14. | Unlisted pers. and household items- incl. health aids | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 16. | Cash | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 17. | Deposits of money | \$0.60 | \$0.00 | \$0.60 | \$0.00 | \$0.60 |
| 18. | Bonds, mutual funds or publicly traded stocks | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 19. | Non-pub. traded stock and int. in businesses | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 20. | Govt. and corp. bonds and other instruments | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 21. | Retirement or pension accounts | \$242.39 | \$0.00 | \$242.39 | \$0.00 | \$242.39 |
| 22. | Security deposits and prepayments | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 23. | Annuities | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 24. | Interests in an education IRA | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 25. | Trusts, equit. or future int. (not in line 1) | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 26. | Patents, copyrights, and other intellectual prop. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 27. | Licenses, franchises, other general intangibles | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 28. | Tax refunds owed to you | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION**

IN RE: **David Austin Hardwick
Charissa Danee Hardwick**

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

| No. | Category | Gross Property Value | Total Encumbrances | Total Equity | Total Amount Exempt | Total Amount Non-Exempt |
|----------------|--------------------------------------------------------|-------------------------|-----------------------|--------------------|------------------------|----------------------------|
| 29. | Family support | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 30. | Other amounts someone owes you | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 31. | Interests in insurance policies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 32. | Any int. in prop. due you from someone who has died | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 33. | Claims vs. third parties, even if no demand | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 34. | Other contin. and unliq. claims of every nature | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 35. | Any financial assets you did not already list | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 38. | Accounts rec. or commissions you already earned | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 39. | Office equipment, furnishings, and supplies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 40. | Mach., fixt., equip., bus. suppl., tools of trade | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 41. | Inventory | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 42. | Interests in partnerships or joint ventures | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 43. | Customer and mailing lists, or other compilations | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 44. | Any business-related property not already listed | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 47. | Farm animals | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 48. | Crops--either growing or harvested | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 49. | Farm/fishing equip., impl., mach., fixt., tools | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 50. | Farm and fishing supplies, chemicals, and feed | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 51. | Farm/commercial fishing-related prop. not listed | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 53. | Any other property of any kind not already listed | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| TOTALS: | | \$95,282.99 | \$83,425.03 | \$11,857.96 | \$1,490.00 | \$10,367.96 |

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION

IN RE: David Austin Hardwick
Charissa Danee Hardwick

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

| Property Description | Market Value | Lien | Equity |
|-------------------------------------------|-------------------|--------------------|---------------|
| <u>Real Property</u> | | | |
| (None) | | | |
| <u>Personal Property</u> | | | |
| 2015 Chrysler 200C (approx. 99,000 miles) | \$5,000.00 | \$11,925.75 | \$0.00 |
| TOTALS: | \$5,000.00 | \$11,925.75 | \$0.00 |

Non-Exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

| Property Description | Market Value | Lien | Equity | Non-Exempt Amount |
|---------------------------------|--------------------|--------------------|--------------------|--------------------|
| <u>Real Property</u> | | | | |
| Rent House | \$93,500.00 | \$83,425.03 | \$10,074.97 | \$10,074.97 |
| <u>Personal Property</u> | | | | |
| Stove | \$50.00 | | \$50.00 | \$50.00 |
| USAA Checking account # 0937-1 | \$0.60 | | \$0.60 | \$0.60 |
| 401(k) | \$242.39 | | \$242.39 | \$242.39 |
| TOTALS: | \$93,792.99 | \$83,425.03 | \$10,367.96 | \$10,367.96 |

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION

IN RE: **David Austin Hardwick**
Charissa Danee Hardwick

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 3

| Summary | |
|----------------------------------------------------------------------|---------------------|
| A. Gross Property Value (not including surrendered property) | \$95,282.99 |
| B. Gross Property Value of Surrendered Property | \$5,000.00 |
| C. Total Gross Property Value (A+B) | \$100,282.99 |
| D. Gross Amount of Encumbrances (not including surrendered property) | \$83,425.03 |
| E. Gross Amount of Encumbrances on Surrendered Property | \$11,925.75 |
| F. Total Gross Encumbrances (D+E) | \$95,350.78 |
| G. Total Equity (not including surrendered property) / (A-D) | \$11,857.96 |
| H. Total Equity in surrendered items (B-E) | \$0.00 |
| I. Total Equity (C-F) | \$11,857.96 |
| J. Total Exemptions Claimed | \$1,490.00 |
| K. Total Non-Exempt Property Remaining (G-J) | \$10,367.96 |

Fill in this information to identify your case:

Debtor 1 **David** **Austin** **Hardwick**
First Name Middle Name Last Name

Debtor 2 **Charissa** **Danee** **Hardwick**
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **EASTERN DISTRICT OF TEXAS**

Case number _____
(if known)

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

| Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
|-------------------------------------------------------------------------|----------------------------------------------------------------|--------------------------------------------|
| \$11,925.75 | \$5,000.00 | \$6,925.75 |

2.1

Ally Financial
Creditor's name
P.O. Box 380902
Number Street

Describe the property that secures the claim:
2015 Chrysler 200C (approx. 99,000 miles)

Bloomington MN 55438
City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☒ Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☒ Other (including a right to offset)

Retail installment contract and security agreement

Date debt was incurred _____ Last 4 digits of account number **9 4 7 9**

Add the dollar value of your entries in Column A on this page. Write that number here:

\$11,925.75

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

| Part 1: Additional Page After listing any entries on this page, number them sequentially from the previous page. | | <i>Column A</i> Amount of claim Do not deduct the value of collateral | <i>Column B</i> Value of collateral that supports this claim | <i>Column C</i> Unsecured portion If any |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------|
| 2.2 | Describe the property that secures the claim: Prime Lending Creditor's name P.O. Box 77404 Number Street Ewing NJ 08628 City State ZIP Code | \$83,425.03 | \$93,500.00 | |
| Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt | | | | |
| As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | |
| Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Fee Simple | | | | |
| Date debt was incurred _____ | | Last 4 digits of account number <u>3</u> <u>4</u> <u>2</u> <u>7</u> | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$83,425.03

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$95,350.78

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1

Blalack & Williams

Name

4851 LBJ Frwy, Suite 750

Number

Street

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Dallas

City

TX

State

75244

ZIP Code

2

Credit Management, LP

Name

6080 Tennyson Pkwy, #100

Number

Street

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Plano

City

TX

State

75024

ZIP Code

Fill in this information to identify your case:

| | | | |
|--------------------------------------------------------------------------|-------------------------------|------------------------------|------------------------------|
| Debtor 1 | David First Name | Austin Middle Name | Hardwick Last Name |
| Debtor 2 (Spouse, if filing) | Charissa First Name | Danee Middle Name | Hardwick Last Name |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS | | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

| | Total claim | Priority amount | Nonpriority amount |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------|--------------------|
| 2.1 | | | |
| Priority Creditor's Name | Last 4 digits of account number | | |
| Number Street | When was the debt incurred? | | |
| As of the date you file, the claim is: Check all that apply. | | | |
| <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | |
| City State ZIP Code | Type of PRIORITY unsecured claim: | | |
| <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify | | | |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

\$730.54

4.1

ADT Security Services

Nonpriority Creditor's Name

3190 Vaughn Way

Number Street

Aurora

City

CO 80014

State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _ _ _ _

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Services

4.2

Alliance Radiology

Nonpriority Creditor's Name

8000 W 110th St #150

Number Street

Overland Park

City

KS 66210

State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _ _ _ _

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical Bills

\$83.00

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$62.00

4.3

Alliance Radiology

Nonpriority Creditor's Name
8000 W 110th St #150
Number Street

Overland Park KS 66210
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.4

American Physician Holding PR

Nonpriority Creditor's Name
8929 Parallel Parkway
Number Street

Kansas City KS 66112
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.5

American Radiology Consultants

Nonpriority Creditor's Name
712 N. Washington Avenue
Number Street

Dallas TX 75246
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

Last 4 digits of account number 1 0 0 0

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

Last 4 digits of account number D Z Z C

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

\$644.71

\$107.00

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$200.00

4.6

Anesthesia Associates of Kansas City PC

Nonpriority Creditor's Name

8717 W. 110th Street, #600

Number Street

Overland Park

KS 66210

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 6 6 2 1

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Mail Order

\$3,315.57

4.7

Army & Air Force Exchange

Nonpriority Creditor's Name

P.O. Box 740813

Number Street

Cincinnati

OH 45274

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 9 1 7 7

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Unsecured Debt

\$0.00

4.8

Berlin-Wheeler, Inc

Nonpriority Creditor's Name

2942A SW Wanamaker Dr Ste 200

Number Street

Topeka

KS 66614

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Anesthesia Associates of Kansas Ci

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.9

\$726.52

Capital One Bank (USA), N.A.

Nonpriority Creditor's Name
6125 Lakeview Road, Suite 800
Number Street

Charlotte NC 28269
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 8 3 3 5

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

4.10

\$465.25

Capital One Bank (USA), N.A.

Nonpriority Creditor's Name
P.O. Box 71083
Number Street

Charlotte NC 28272-1083
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 7 9 0 5

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

4.11

\$69.62

Care for Women, LLC

Nonpriority Creditor's Name
1004 Progress Drive, Suite 1207
Number Street

Lansing KS 66043
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 1 7 1 9

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$7,036.26

4.12

CarMax Auto Finance

Nonpriority Creditor's Name

P.O. Box 440609

Number Street

Kennesaw

GA

30160-9511

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **7 3 4 9**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Deficiency Balance on Loan

4.13

Central States Recovery

Nonpriority Creditor's Name

1314 N Main Street

Number Street

Hutchinson

KS

67501

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Alliance Radiology

\$0.00

4.14

Children's Health

Nonpriority Creditor's Name

P.O. Box 841233

Number Street

Dallas

TX

75284-1233

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1 5 1 2**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

\$3,230.85

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$208.00

4.15

Community Wealth

Nonpriority Creditor's Name

P.O. Box 1908

Number Street

Greenville

TX

75403

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 9 2 0

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Unsecured Debt

4.16

Computer Credit Inc.

Nonpriority Creditor's Name

470 W. Hanes Mill Rd.

Number Street

Winston Salem

NC

27113

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Presbyterian Hospital of Rockwall

4.17

Credence Resource Management, LLC

Nonpriority Creditor's Name

17000 Dallas Parkway, Ste. 204

Number Street

Dallas

TX

75248

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Emergency Medical Service of Kansas

\$0.00

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$234.00

4.18

Defense Financial and Account Services

Nonpriority Creditor's Name
6760 E. Irvington Place

Number Street

Denver CO 80279

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Unsecured Debt

4.19

Emergency Medical Service of Kansas

Nonpriority Creditor's Name
711 Marshall Street

Number Street

Leavenworth KS 66048

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 3 6 5 4

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

\$77.08

4.20

Franklin Collection

Nonpriority Creditor's Name
PO Box 3910

Number Street

Tupelo MS 38803

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for American Physician Holding PR

\$0.00

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$0.00

4.21

Kansas Counselors, Inc.

Nonpriority Creditor's Name

P.O. Box 14765

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Shawnee Mission KS 66285

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Westglen GI Consultants

4.22

Kansas Counselors, Inc.

Nonpriority Creditor's Name

Dept. 1759, P.O. Box 4115

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Concord CA 94524

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Prime Healthcare Physician Services

4.23

Kansas Counselors, Inc.

Nonpriority Creditor's Name

P.O. Box 14765

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Shawnee Mission KS 66285

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Providence Medical Center

\$0.00

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$0.00

4.24

Medicredit Corporation

Nonpriority Creditor's Name

P.O. Box 1629

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Care for Women, LLC

Maryland Heights MO 63043-0629

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.25

Medicredit Corporation

Nonpriority Creditor's Name

P.O. Box 1496

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Overland Park Regional Medical Cent

Maryland Heights MO 63043

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.26

Merrick Bank

Nonpriority Creditor's Name

PO Box 660702

Number Street

Last 4 digits of account number 8 2 7 9

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

Dallas TX 75266-0702

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

\$725.89

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.27

\$2,785.00

Military Star

Nonpriority Creditor's Name
3911 S. Walton Walker Blvd.
Number Street

Dallas TX 75236
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.28

\$0.00

Miramend Revenue Group

Nonpriority Creditor's Name
P.O. Box 1411
Number Street

Carol Stream IL 60132
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.29

\$4,586.72

Mohela/US Department of Education

Nonpriority Creditor's Name
633 Spirit Drive
Number Street

Chesterfield MO 63005
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for UT Southwestern Medical Center

Last 4 digits of account number 4 3 9 0

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$4,899.19

4.30

Navy Federal Credit Union

Nonpriority Creditor's Name

P.O. Box 3501

Number Street

Merrifield

VA

22119

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **7 1 0 9**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

\$2,362.02

4.31

Navy Federal Credit Union

Nonpriority Creditor's Name

PO Box 3302

Number Street

Merrifield

VA

22119-3302

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **9 6 4 1**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

\$2,491.30

4.32

Nebraska Furniture Mart

Nonpriority Creditor's Name

P.O. Box 2335

Number Street

Omaha

NE

68103

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **9 9 7 0**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Unsecured Debt

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$978.46

4.33

Nebraska Furniture Mart

Nonpriority Creditor's Name

P.O. Box 3456

Number Street

Omaha

NE

68103

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 1 4 3 2

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Unsecured Debt

4.34

Overland Park Regional Medical Center

Nonpriority Creditor's Name

10500 Quivira Road

Number Street

Overland Park

KS

66215

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 1 7 1 9

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

\$2,803.31

4.35

Presbyterian Hospital of Rockwall

Nonpriority Creditor's Name

P.O. Box 676882

Number Street

Dallas

TX

75267

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 1 5 3 4

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

\$2,136.75

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$136.88

4.36

Prime Healthcare Physician Services

Nonpriority Creditor's Name

8929 Parallel Parkway

Number Street

Kansas City

KS

66112

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 9 8 3 6

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

\$1,806.12

4.37

Providence Medical Center

Nonpriority Creditor's Name

8929 Parallel Parkway

Number Street

Kansas City

KS

66112

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 3 6 2

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

\$0.00

4.38

Receivable Management Group

Nonpriority Creditor's Name

2901 University Avenue, #29

Number Street

Columbus

GA

31907-7606

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for American Radiology Consultants

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$686.00

4.39

Sunflower Medical Group, PA

Nonpriority Creditor's Name

5555 W. 58th Street

Number Street

Last 4 digits of account number 6 3 9 0

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

Mission KS 66202

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.40

Synchrony Bank/Care Credit

Nonpriority Creditor's Name

P.O. Box 960061

Number Street

Last 4 digits of account number 7 7 1 2

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

Orlando FL 32896

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.41

Texas Medicine Resources, LLP Rockwall

Nonpriority Creditor's Name

3150 Horizon Road

Number Street

Last 4 digits of account number 9 1 9 4

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

Rockwall TX 75032

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

\$1,402.00

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$0.00

4.42

United Revenue Corp.

Nonpriority Creditor's Name
204 Billings Suite 120

Number Street

Arlington TX 76010

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for Texas Medicine Resources, LLP Rockw

4.43

UT Southwestern Medical Center

Nonpriority Creditor's Name
at Children's Medical Center

Number Street

POB 845347

Dallas TX 75284

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 8 5 6 7

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Bills

\$410.25

4.44

Verizon

Nonpriority Creditor's Name
P.O. Box 660108

Number Street

Dallas TX 75266

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Unsecured Debt

\$2,691.77

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$56.05

4.45

Westglen GI Consultants

Nonpriority Creditor's Name

7230 Renner Road

Number Street

Last 4 digits of account number 3 4 2 0

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Shawnee

KS

66217

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Unsecured Debt

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Carson Smithfield, LLC

Name

PO Box 9216

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Collecting for Merrick Bank ☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Old Bethpage

NY

11804

City

State

ZIP Code

Transworld Systems, Inc.

Name

P.O. Box 15110

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Collecting for Army & Air Force Exchange ☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Wilmington

DE

19850

City

State

ZIP Code

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | Total claim |
|--------------------------|-----------------------------------------------------------------------------|---------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. <u>\$0.00</u> |
| | 6b. Taxes and certain other debts you owe the government | 6b. <u>\$0.00</u> |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. <u>\$0.00</u> |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. + <u>\$0.00</u> |
| | 6e. Total. Add lines 6a through 6d. | 6d. <u>\$0.00</u> |

| | | Total claim |
|--------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------|
| Total claims from Part 2 | 6f. Student loans | 6f. <u>\$4,586.72</u> |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. <u>\$0.00</u> |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. <u>\$0.00</u> |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. + <u>\$44,334.56</u> |
| | 6j. Total. Add lines 6f through 6i. | 6j. <u>\$48,921.28</u> |

Fill in this information to identify your case:

| | | | |
|--------------------------------------------------------------------------|-------------------------------|------------------------------|------------------------------|
| Debtor 1 | David First Name | Austin Middle Name | Hardwick Last Name |
| Debtor 2 (Spouse, if filing) | Charissa First Name | Danee Middle Name | Hardwick Last Name |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS | | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1 ADT Security Services

Name
3190 Vaughn Way
Number Street

Security
Contract to be REJECTED

Aurora **CO** **80014**
City State ZIP Code

2.2 Verizon

Name
140 West Street
Number Street

Cell Contract
Contract to be REJECTED

New York **NY** **10007**
City State ZIP Code

| Fill in this information to identify your case: | | | |
|--------------------------------------------------------------------------|-------------------------------|------------------------------|------------------------------|
| Debtor 1 | David First Name | Austin Middle Name | Hardwick Last Name |
| Debtor 2 (Spouse, if filing) | Charissa First Name | Danee Middle Name | Hardwick Last Name |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS | | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☒ No
☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No. Go to line 3.
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
☐ No
☒ Yes

In which community state or territory did you live? Texas Fill in the name and current address of that person.

Charissa Danee Hardwick

Name of your spouse, former spouse, or legal equivalent

206 N. Morrow Street

Number Street

Blue Ridge

City

TX

State

75424

ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|----------------------------------|---------------|-----------------|
| Debtor 1 | David | Austin | Hardwick |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | Charissa | Danee | Hardwick |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | EASTERN DISTRICT OF TEXAS | | |
| Case number (if known) | | | |

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

- ☐ Employed
☒ Not employed

Debtor 2 or non-filing spouse

- ☐ Employed
☒ Not employed

Occupation

Unemployed

Unemployed

Employer's name

Employer's address

Number Street

Number Street

City

State Zip Code

City

State Zip Code

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | \$0.00 | \$0.00 |
| 3. Estimate and list monthly overtime pay. | \$0.00 | \$0.00 |
| 4. Calculate gross income. Add line 2 + line 3. | \$0.00 | \$0.00 |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------------------------|
| Copy line 4 here → 4. | \$0.00 | \$0.00 |
| 5. List all payroll deductions: | | |
| 5a. Tax, Medicare, and Social Security deductions | \$0.00 | \$0.00 |
| 5b. Mandatory contributions for retirement plans | \$0.00 | \$0.00 |
| 5c. Voluntary contributions for retirement plans | \$0.00 | \$0.00 |
| 5d. Required repayments of retirement fund loans | \$0.00 | \$0.00 |
| 5e. Insurance | \$0.00 | \$0.00 |
| 5f. Domestic support obligations | \$0.00 | \$0.00 |
| 5g. Union dues | \$0.00 | \$0.00 |
| 5h. Other deductions. Specify: _____ | \$0.00 | \$0.00 |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. | \$0.00 | \$0.00 |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | \$0.00 | \$0.00 |
| 8. List all other income regularly received: | | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | \$810.00 | \$0.00 |
| 8b. Interest and dividends | \$0.00 | \$0.00 |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | \$0.00 | \$0.00 |
| 8d. Unemployment compensation | \$0.00 | \$0.00 |
| 8e. Social Security | \$0.00 | \$0.00 |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____ | \$0.00 | \$0.00 |
| 8g. Pension or retirement income | \$0.00 | \$0.00 |
| 8h. Other monthly income. Specify: GI Bill | \$1,330.78 | \$0.00 |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | \$2,140.78 | \$0.00 |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | \$2,140.78 | \$0.00 |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____ | | \$0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. | | \$2,140.78 Combined monthly income |
| 13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. None. <input type="checkbox"/> Yes. Explain: _____ | | |

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|----------------------------------|---------------|-----------------|
| Debtor 1 | David | Austin | Hardwick |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | Charissa | Danee | Hardwick |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | EASTERN DISTRICT OF TEXAS | | |
| Case number (if known) | _____ | | |

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY _____

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. **Does Debtor 2 live in a separate household?**
- ☒ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No

☒ Yes. Fill out this information for each dependent.....

| Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
|---------------------------------------------------------|------------------------|-----------------------------------------|
| <u>Daughter</u> | <u>1</u> | <input type="checkbox"/> No |
| | | <input checked="" type="checkbox"/> Yes |
| | | <input type="checkbox"/> No |
| | | <input type="checkbox"/> Yes |
| | | <input type="checkbox"/> No |
| | | <input type="checkbox"/> Yes |
| | | <input type="checkbox"/> No |
| | | <input type="checkbox"/> Yes |
| | | <input type="checkbox"/> No |
| | | <input type="checkbox"/> Yes |

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence.
Include first mortgage payments and any rent for the ground or lot.
If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4. _____

4a. _____

4b. _____

4c. _____

4d. _____

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Your expenses

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-----------------|
| 5. Additional mortgage payments for your residence , such as home equity loans | 5. | _____ |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | _____ |
| 6b. Water, sewer, garbage collection | 6b. | _____ |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$150.00 |
| 6d. Other. Specify: _____ | 6d. | _____ |
| 7. Food and housekeeping supplies | 7. | \$300.00 |
| 8. Childcare and children's education costs | 8. | _____ |
| 9. Clothing, laundry, and dry cleaning | 9. | \$25.00 |
| 10. Personal care products and services | 10. | \$25.00 |
| 11. Medical and dental expenses | 11. | \$20.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$200.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | _____ |
| 14. Charitable contributions and religious donations | 14. | _____ |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. | _____ |
| 15b. Health insurance | 15b. | _____ |
| 15c. Vehicle insurance | 15c. | \$169.84 |
| 15d. Other insurance. Specify: _____ | 15d. | _____ |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____ | 16. | _____ |
| 17. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 2015 Chrysler 200C | 17a. | \$364.93 |
| 17b. Car payments for Vehicle 2 | 17b. | _____ |
| 17c. Other. Specify: _____ | 17c. | _____ |
| 17d. Other. Specify: _____ | 17d. | _____ |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | _____ |
| 19. Other payments you make to support others who do not live with you. Specify: _____ | 19. | _____ |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

| | | |
|---------------------------------------------------|------|-----------------|
| 20a. Mortgages on other property | 20a. | <u>\$747.63</u> |
| 20b. Real estate taxes | 20b. | _____ |
| 20c. Property, homeowner's, or renter's insurance | 20c. | _____ |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | <u>\$100.00</u> |
| 20e. Homeowner's association or condominium dues | 20e. | _____ |

21. Other. Specify: _____ 21. **+** _____

22. Calculate your monthly expenses.

| | | |
|---------------------------------------------------------------------------------------|------|-------------------|
| 22a. Add lines 4 through 21. | 22a. | <u>\$2,102.40</u> |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b. | _____ |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | 22c. | <u>\$2,102.40</u> |

23. Calculate your monthly net income.

| | | |
|---------------------------------------------------------------------------------------------------------|------|--------------------|
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | <u>\$2,140.78</u> |
| 23b. Copy your monthly expenses from line 22c above. | 23b. | <u>-\$2,102.40</u> |
| 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | <u>\$38.38</u> |

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes. Explain here:

None.

Fill in this information to identify your case:

| | | | |
|--------------------------------------------------------------------------|-----------------|---------------|-----------------|
| Debtor 1 | David | Austin | Hardwick |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | Charissa | Danee | Hardwick |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B..... **\$93,500.00**

1b. Copy line 62, Total personal property, from Schedule A/B..... **\$6,782.99**

1c. Copy line 63, Total of all property on Schedule A/B..... **\$100,282.99**

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$95,350.78**

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$0.00**

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... **+** **\$48,921.28**

Your total liabilities

\$144,272.06

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I..... **\$2,140.78**

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J..... **\$2,102.40**

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$2,140.78

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

| | |
|------------------------------------------------------------------------------------------------------------------------------|-------------------|
| 9a. Domestic support obligations. (Copy line 6a.) | \$0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 |
| 9d. Student loans. (Copy line 6f.) | \$4,586.72 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + \$0.00 |
| 9g. Total. Add lines 9a through 9f. | \$4,586.72 |

Fill in this information to identify your case:

| | | | |
|--------------------------------------------------------------------------|-----------------|---------------|-----------------|
| Debtor 1 | David | Austin | Hardwick |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | Charissa | Danee | Hardwick |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS | | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ David Austin Hardwick _____

David Austin Hardwick, Debtor 1

Date **03/31/2020**
MM / DD / YYYY

X /s/ Charissa Danee Hardwick _____

Charissa Danee Hardwick, Debtor 2

Date **03/31/2020**
MM / DD / YYYY

Fill in this information to identify your case:

| | | | |
|--------------------------------------------------------------------------|-----------------|---------------|-----------------|
| Debtor 1 | David | Austin | Hardwick |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | Charissa | Danee | Hardwick |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☐ No
☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

**Dates Debtor 1
lived there**

Debtor 2:

**Dates Debtor 2
lived there**

☐ Same as Debtor 1

☐ Same as Debtor 1

714 Prospect Street

Number Street

From **10/13/2017**

To **03/16/2019**

Number Street

From _____

To _____

Leavenworth KS 66048-3271

City State ZIP Code

City State ZIP Code

Debtor 1:

**Dates Debtor 1
lived there**

Debtor 2:

**Dates Debtor 2
lived there**

☐ Same as Debtor 1

☐ Same as Debtor 1

915 Cheyenne Street

Number Street

From **01/01/2017**

To **10/13/2017**

Number Street

From _____

To _____

Leavenworth KS 66048

City State ZIP Code

City State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No
☒ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

| | Debtor 1 | Debtor 2 |
|---------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of the current year until the date you filed for bankruptcy: | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$0.00 |
| For the last calendar year: (January 1 to December 31, <u>2019</u>) | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$22,057.00 |
| For the calendar year before that: (January 1 to December 31, <u>2018</u>) | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$63,676.00 |
| | | <input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No
☒ Yes. Fill in the details.

| | Debtor 1 | Debtor 2 |
|---------------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| From January 1 of the current year until the date you filed for bankruptcy: | Rental Income GI Bill | \$2,430.00 \$3,992.34 |
| For the last calendar year: (January 1 to December 31, <u>2019</u>) | Rental Income GI Bill | \$5,670.00 \$9,315.46 |
| For the calendar year before that: (January 1 to December 31, <u>2018</u>) | | |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| | Dates of payment | Total amount paid | Amount you still owe | Was this payment for... |
|-------------------------------------------------------------------------------------|---------------------|--------------------------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Prime Lending Creditor's name P.O. Box 77404 Number Street | Last 90 Days | \$2,242.89 | \$83,425.03 | <input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____ |
| Ewing City | NJ State | 08628 ZIP Code | | |
| Ally Financial Creditor's name P.O. Box 380902 Number Street | Last 90 Days | \$1,094.79 | \$11,925.75 | <input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____ |
| Bloomington City | MN State | 55438 ZIP Code | | |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- ☐ No
☒ Yes. List all payments to an insider.

| | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|-----------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------|----------------------|-------------------------|
| Christopher Reed (Joint Debtor's Father) Insider's name 12702 FM 981 Number Street | 1/3/2020 and 1/10/2020 | \$520.00 | \$480.00 | |
| Blue Ridge City | TX State | 75254 ZIP Code | | |

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
☐ Yes. List all payments that benefited an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☒ No
☐ Yes. Fill in the details.

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- ☐ No. Go to line 11.
☒ Yes. Fill in the information below.

| | Describe the property | Date | Value of the property |
|-----------------------------------------------|--------------------------------------------------------------------|-------------------------------|-----------------------|
| CarMax Auto Finance Creditor's Name | 2015 Nissan Altima | 09/04/2019 | \$8,000.00 |
| P.O. Box 440609 Number Street | Explain what happened | | |
| | <input checked="" type="checkbox"/> Property was repossessed. | | |
| | <input type="checkbox"/> Property was foreclosed. | | |
| | <input type="checkbox"/> Property was garnished. | | |
| | <input type="checkbox"/> Property was attached, seized, or levied. | | |
| Kennesaw City | GA State | 30160-9511 ZIP Code | |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

☒ No
☐ Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☒ No
☐ Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No
☐ Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No
☐ Yes. Fill in the details.

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

☐ No
☒ Yes. Fill in the details.

| Description and value of any property transferred | | | Date payment or transfer was made | Amount of payment |
|---------------------------------------------------|-----------|--------------|-----------------------------------|-------------------|
| Abacus Credit Counseling | | | | |
| Person Who Was Paid | | | | |
| 17337 Ventura Boulevard | | | 02/16/2020 | \$25.00 |
| Number Street | | | | |
| Suite 205 | | | | |
| | | | | |
| Encino | CA | 91316 | | |
| City | State | ZIP Code | | |
| www.abacuscc.org | | | | |
| Email or website address | | | | |
| | | | | |
| Person Who Made the Payment, if Not You | | | | |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

| Description and value of any property transferred | | | Date payment or transfer was made | Amount of payment |
|----------------------------------------------------|-----------|--------------|-----------------------------------|-------------------|
| Law Office of David S Kohm & Associate: | | | | |
| Person Who Was Paid | | | | |
| 1414 W Randol Mill Rd | | | 03/20/2020 | \$1,515.00 |
| Number Street | | | | |
| Ste 210 | | | 03/20/2020 | \$335.00 |
| | | | | |
| Arlington | TX | 76012 | | |
| City | State | ZIP Code | | |

Email or website address _____

Person Who Made the Payment, if Not You _____

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No
☐ Yes. Fill in the details.

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.
☐ Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☐ No
☐ Yes. Fill in the details below.

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ David Austin Hardwick
David Austin Hardwick, Debtor 1

X /s/ Charissa Danee Hardwick
Charissa Danee Hardwick, Debtor 2

Date 03/31/2020

Date 03/31/2020

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

| | | | |
|--------------------------------------------------------------------------|-------------------------------|------------------------------|------------------------------|
| Debtor 1 | David First Name | Austin Middle Name | Hardwick Last Name |
| Debtor 2 (Spouse, if filing) | Charissa First Name | Danee Middle Name | Hardwick Last Name |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS | | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

Creditor's name: **Ally Financial**

Description of property securing debt: **2015 Chrysler 200C (approx. 99,000 miles)**

- ☒ Surrender the property.
- ☐ Retain the property and redeem it.
- ☐ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]:

- ☐ No
- ☐ Yes

Creditor's name: **Prime Lending**

Description of property securing debt: **Rent House**

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☒ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]:

- ☐ No
- ☐ Yes

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

Lessor's name: **ADT Security Services**
Description of leased property: **Security**

☒ No
☐ Yes

Lessor's name: **Verizon**
Description of leased property: **Cell Contract**

☒ No
☐ Yes

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ David Austin Hardwick
David Austin Hardwick, Debtor 1

X /s/ Charissa Danee Hardwick
Charissa Danee Hardwick, Debtor 2

Date **03/31/2020**
MM / DD / YYYY

Date **03/31/2020**
MM / DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- **You are an individual filing for bankruptcy,**
and
- **Your debts are primarily consumer debts.**
Consumer debts are defined in 11 U.S.C. § 101(8)
as "incurred by an individual primarily for a
personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one
of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family
farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for
individuals with regular income

**You should have an attorney review your
decision to file for bankruptcy and the choice
of chapter.**

Chapter 7: Liquidation

| | | |
|---|-------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty
preventing them from paying their debts and who are
willing to allow their non-exempt property to be used to
pay their creditors. The primary purpose of filing under
chapter 7 is to have your debts discharged. The
bankruptcy discharge relieves you after bankruptcy from
having to pay many of your pre-bankruptcy debts.
Exceptions exist for particular debts, and liens on
property may still be enforced after discharge. For
example, a creditor may have the right to foreclose a
home mortgage or repossess an automobile.

However, if the court finds that you have committed
certain kinds of improper conduct described in the
Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and
you receive a discharge, some debts are not discharged
under the law. Therefore, you may still be responsible to
pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form--sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | | |
|---|---------|--------------------|
| | \$1,167 | filing fee |
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | | |
|---|-------|--------------------|
| | \$200 | filing fee |
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | | |
|---|-------|--------------------|
| | \$235 | filing fee |
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together--called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION**

In re **David Austin Hardwick
Charissa Danee Hardwick**

Case No. _____

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | |
|------------------------------------------------------------|--------------------------|
| For legal services, I have agreed to accept..... | <u>\$2,000.00</u> |
| Prior to the filing of this statement I have received..... | <u>\$1,515.00</u> |
| Balance Due..... | <u>\$485.00</u> |

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/31/2020

Date

/s/ David S. Kohm

David S. Kohm

David S Kohm

1414 W. Randol Mill Rd., Suite 118

Arlington, TX 76012

Phone: (817) 861-8400 / Fax: (817) 861-8900

Bar No. 11658563

/s/ David Austin Hardwick

David Austin Hardwick

/s/ Charissa Danee Hardwick

Charissa Danee Hardwick

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION**

IN RE: **David Austin Hardwick
Charissa Danee Hardwick**

CASE NO

CHAPTER **7**

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 3/31/2020

Signature /s/ David Austin Hardwick
David Austin Hardwick

Date 3/31/2020

Signature /s/ Charissa Danee Hardwick
Charissa Danee Hardwick

ADT Security Services
3190 Vaughn Way
Aurora, CO 80014

Alliance Radiology
8000 W 110th St #150
Overland Park, KS 66210

Ally Financial
P.O. Box 380902
Bloomington, MN 55438

American Physician Holding PR
8929 Parallel Parkway
Kansas City, KS 66112

American Radiology Consultants
712 N. Washington Avenue
Dallas, TX 75246

Anesthesia Associates of Kansas City PC
8717 W. 110th Street, #600
Overland Park, KS 66210

Army & Air Force Exchange
P.O. Box 740813
Cincinnati, OH 45274

Attorney General
Collection Division/BK Sec.
PO Box 12548
Austin, TX 78711-2548

Berlin-Wheeler, Inc
2942A SW Wanamaker Dr Ste 200
Topeka, KS 66614

Blalack & Williams
4851 LBJ Frwy, Suite 750
Dallas, TX 75244

Capital One Bank (USA), N.A.
6125 Lakeview Road, Suite 800
Charlotte, NC 28269

Capital One Bank (USA), N.A.
P.O. Box 71083
Charlotte, NC 28272-1083

Care for Women, LLC
1004 Progress Drive, Suite 1207
Lansing, KS 66043

CarMax Auto Finance
P.O. Box 440609
Kennesaw, GA 30160-9511

Carson Smithfield, LLC
PO Box 9216
Old Bethpage, NY 11804

Central States Recovery
1314 N Main Street
Hutchinson, KS 67501

Children's Health
P.O. Box 841233
Dallas, TX 75284-1233

Community Wealth
P.O. Box 1908
Greenville, TX 75403

Comptroller of Public Accounts
Revenue Acct. Division
PO Box 13528
Austin, TX 78711

Computer Credit Inc.
470 W. Hanes Mill Rd.
Winston Salem, NC. 27113

Credence Resource Management, LLC
17000 Dallas Parkway, Ste. 204
Dallas, TX 75248

Credit Management, LP
6080 Tennyson Pkwy, #100
Plano, TX 75024

Defense Financial and Account Services
6760 E. Irvington Place
Denver, CO 80279

Emergency Medical Service of Kansas
711 Marshall Street
Leavenworth, KS 66048

Franklin Collection
PO Box 3910
Tupelo, MS 38803

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

Kansas Counselors, Inc.
P.O. Box 14765
Shawnee Mission, KS 66285

Kansas Counselors, Inc.
Dept. 1759, P.O. Box 4115
Concord, CA 94524

Medicredit Corporation
P.O. Box 1629
Maryland Heights, MO 63043-0629

Medicredit Corporation
P.O. Box 1496
Maryland Heights, MO 63043

Merrick Bank
PO Box 660702
Dallas, Texas 75266-0702

Military Star
3911 S. Walton Walker Blvd.
Dallas, TX 75236

Miramed Revenue Group
P.O. Box 1411
Carol Stream, IL 60132

Mohela/US Department of Education
633 Spirit Drive
Chesterfield, MO 63005

Navy Federal Credit Union
P.O. Box 3501
Merrifield, VA. 22119

Navy Federal Credit Union
PO Box 3302
Merrifield, VA 22119-3302

Nebraska Furniture Mart
P.O. Box 2335
Omaha, NE 68103

Nebraska Furniture Mart
P.O. Box 3456
Omaha, NE 68103

Overland Park Regional Medical Center
10500 Quivira Road
Overland Park, KS 66215

Presbyterian Hospital of Rockwall
P.O. Box 676882
Dallas, Texas 75267

Prime Healthcare Physician Services
8929 Parallel Parkway
Kansas City, KS 66112

Prime Lending
P.O. Box 77404
Ewing, NJ 08628

Providence Medical Center
8929 Parallel Parkway
Kansas City, KS 66112

Receivable Management Group
2901 University Avenue, #29
Columbus, GA 31907-7606

Sunflower Medical Group, PA
5555 W. 58th Street
Mission, KS 66202

Synchrony Bank/Care Credit
P.O. Box 960061
Orlando, FL 32896

Texas Alcohol Beverage Commission
License & Permit Division
PO Box 13127
Austin, TX 78711-3127

Texas Medicine Resources, LLP Rockwall
3150 Horizon Road
Rockwall, TX 75032

Texas Workforce Commission
Tax Dept. Collection
BK Room 556-A
Austin, TX 78778

Transworld Systems, Inc.
P.O. Box 15110
Wilmington, DE 19850

United Revenue Corp.
204 Billings Suite 120
Arlington, Texas 76010

United States Attorney
3rd Floor, 1100 Commerce St.
Dallas, TX 75242

United States Trustee
1100 N College Ave
Tyler, TX 75702

UT Southwestern Medical Center
at Children's Medical Center
POB 845347
Dallas, TX 75284

Verizon
P.O. Box 660108
Dallas, TX 75266

Verizon
140 West Street
New York, NY 10007

Westglen GI Consultants
7230 Renner Road
Shawnee, KS 66217

ADT Security Services
3190 Vaughn Way
Aurora, CO 80014

Capital One Bank (USA), N.A.
6125 Lakeview Road, Suite 800
Charlotte, NC 28269

Credence Resource Management, L.
17000 Dallas Parkway, Ste. 204
Dallas, TX 75248

Alliance Radiology
8000 W 110th St #150
Overland Park, KS 66210

Capital One Bank (USA), N.A.
P.O. Box 71083
Charlotte, NC 28272-1083

Credit Management, LP
6080 Tennyson Pkwy, #100
Plano, TX 75024

Ally Financial
P.O. Box 380902
Bloomington, MN 55438

Care for Women, LLC
1004 Progress Drive, Suite 1207
Lansing, KS 66043

Defense Financial and Account S
6760 E. Irvington Place
Denver, CO 80279

American Physician Holding PR
8929 Parallel Parkway
Kansas City, KS 66112

CarMax Auto Finance
P.O. Box 440609
Kennesaw, GA 30160-9511

Emergency Medical Service of Ka
711 Marshall Street
Leavenworth, KS 66048

American Radiology Consultants
712 N. Washington Avenue
Dallas, TX 75246

Carson Smithfield, LLC
PO Box 9216
Old Bethpage, NY 11804

Franklin Collection
PO Box 3910
Tupelo, MS 38803

Anesthesia Associates of Kansa
8717 W. 110th Street, #600
Overland Park, KS 66210

Central States Recovery
1314 N Main Street
Hutchinson, KS 67501

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

Army & Air Force Exchange
P.O. Box 740813
Cincinnati, OH 45274

Children's Health
P.O. Box 841233
Dallas, TX 75284-1233

Kansas Counselors, Inc.
P.O. Box 14765
Shawnee Mission, KS 66285

Attorney General
Collection Division/BK Sec.
PO Box 12548
Austin, TX 78711-2548

Community Wealth
P.O. Box 1908
Greenville, TX 75403

Kansas Counselors, Inc.
Dept. 1759, P.O. Box 4115
Concord, CA 94524

Berlin-Wheeler, Inc
2942A SW Wanamaker Dr Ste 200
Topeka, KS 66614

Comptroller of Public Accounts
Revenue Acct. Division
PO Box 13528
Austin, TX 78711

Medicredit Corporation
P.O. Box 1629
Maryland Heights, MO 63043-062

Blalack & Williams
4851 LBJ Frwy, Suite 750
Dallas, TX 75244

Computer Credit Inc.
470 W. Hanes Mill Rd.
Winston Salem, NC. 27113

Medicredit Corporation
P.O. Box 1496
Maryland Heights, MO 63043

Merrick Bank
PO Box 660702
Dallas, Texas 75266-0702

Prime Healthcare Physician Serv
8929 Parallel Parkway
Kansas City, KS 66112

United Revenue Corp.
204 Billings Suite 120
Arlington, Texas 76010

Military Star
3911 S. Walton Walker Blvd.
Dallas, TX 75236

Prime Lending
P.O. Box 77404
Ewing, NJ 08628

United States Attorney
3rd Floor, 1100 Commerce St.
Dallas, TX 75242

Miramed Revenue Group
P.O. Box 1411
Carol Stream, IL 60132

Providence Medical Center
8929 Parallel Parkway
Kansas City, KS 66112

United States Trustee
1100 N College Ave
Tyler, TX 75702

Mohela/US Department of Education
633 Spirit Drive
Chesterfield, MO 63005

Receivable Management Group
2901 University Avenue, #29
Columbus, GA 31907-7606

UT Southwestern Medical Center
at Children's Medical Center
POB 845347
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New York, NY 10007

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Omaha, NE 68103

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PO Box 13127
Austin, TX 78711-3127

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7230 Renner Road
Shawnee, KS 66217

Nebraska Furniture Mart
P.O. Box 3456
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Texas Medicine Resources, LLP
3150 Horizon Road
Rockwall, TX 75032

Overland Park Regional Medical Center
10500 Quivira Road
Overland Park, KS 66215

Texas Workforce Commission
Tax Dept. Collection
BK Room 556-A
Austin, TX 78778

Presbyterian Hospital of Rockwall
P.O. Box 676882
Dallas, Texas 75267

Transworld Systems, Inc.
P.O. Box 15110
Wilmington, DE 19850

| Fill in this information to identify your case: | | | | Check one box only as directed in this form and in Form 122A-1Supp: | |
|--------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------|---------------------------------------------|---------------------------------------------------------------------|--|
| Debtor 1 | David <small>First Name</small> | Austin <small>Middle Name</small> | Hardwick <small>Last Name</small> | | |
| Debtor 2 (Spouse, if filing) | Charissa <small>First Name</small> | Danee <small>Middle Name</small> | Hardwick <small>Last Name</small> | | |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS | | | | | |
| Case number (if known) | | | | | |

☒ 1. There is no presumption of abuse.
☐ 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☐ **Not married.** Fill out Column A, lines 2-11.
- ☒ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------------------------------|
| 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). | \$0.00 | \$0.00 |
| 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. | \$0.00 | \$0.00 |
| 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. | \$0.00 | \$0.00 |

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Column A
Debtor 1

Column B
Debtor 2 or
non-filing spouse

5. Net income from operating a business, profession, or farm

| | Debtor 1 | Debtor 2 | | |
|---------------------------------------------------------|-----------------|-----------------|-------------|-----------------------------|
| Gross receipts (before all deductions) | <u>\$0.00</u> | <u>\$0.00</u> | | |
| Ordinary and necessary operating expenses | — <u>\$0.00</u> | — <u>\$0.00</u> | | |
| Net monthly income from a business, profession, or farm | <u>\$0.00</u> | <u>\$0.00</u> | Copy here → | <u>\$0.00</u> <u>\$0.00</u> |

6. Net income from rental and other real property

| | Debtor 1 | Debtor 2 | | |
|-------------------------------------------------------|-----------------|-----------------|-------------|-------------------------------|
| Gross receipts (before all deductions) | <u>\$810.00</u> | <u>\$0.00</u> | | |
| Ordinary and necessary operating expenses | — <u>\$0.00</u> | — <u>\$0.00</u> | | |
| Net monthly income from rental or other real property | <u>\$810.00</u> | <u>\$0.00</u> | Copy here → | <u>\$810.00</u> <u>\$0.00</u> |

7. Interest, dividends, and royalties

\$0.00 \$0.00

8. Unemployment compensation

\$0.00 \$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:↓

For you..... \$0.00

For your spouse..... \$0.00

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$0.00 \$0.00

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

GI Bill \$1,330.78

Total amounts from separate pages, if any. + _____ + _____

Debtor 1 **David Austin Hardwick**
Debtor 2 **Charissa Danee Hardwick**

Case number (if known) _____

Column A
Debtor 1

Column B
Debtor 2 or
non-filing spouse

11. Calculate your total current monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

| | | | | |
|------------|---|--------|---|------------|
| \$2,140.78 | + | \$0.00 | = | \$2,140.78 |
|------------|---|--------|---|------------|

Total current
monthly income

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11.....**Copy line 11 here** → 12a. **\$2,140.78**

Multiply by 12 (the number of months in a year).

X 12

12b. The result is your annual income for this part of the form. 12b. **\$25,689.36**

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

Texas

Fill in the number of people in your household.

3

Fill in the median family income for your state and size of household..... 13. **\$72,632.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*
Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*
Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ David Austin Hardwick

David Austin Hardwick, Debtor 1

X /s/ Charissa Danee Hardwick

Charissa Danee Hardwick, Debtor 2

Date **3/31/2020**

MM / DD / YYYY

Date **3/31/2020**

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION

IN RE:

David Austin Hardwick
Charissa Danee Hardwick

Debtor(s)

§
§
§
§
§

Case No. _____

Chapter 7

**DECLARATION FOR ELECTRONIC FILING OF BANKRUPTCY
PETITION, LISTS, STATEMENTS, AND SCHEDULES**

PART I: DECLARATION OF PETITIONER:

As an individual debtor in this case, or as the individual authorized to act on behalf of the corporation, partnership, or limited liability company seeking bankruptcy relief in this case, I hereby request relief as, or on behalf of, the debtor in accordance with the chapter of title 11, United States Code, specified in the petition to be filed electronically in this case. I have read the information provided in the petition, lists, statements, and schedules to be filed electronically in this case and I HEREBY DECLARE UNDER PENALTY OF PERJURY that the information provided therein, as well as the social security information disclosed in this document, is true and correct. I understand that this Declaration is to be filed with the Bankruptcy Court within five (5) business days after the petition, lists, statements, and schedules have been filed electronically. I understand that a failure to file the signed original of this Declaration will result in the dismissal of my case.



[Only include for Chapter 7 individual petitioners whose debts are primarily consumer debts] --

I am an individual whose debts are primarily consumer debts and who has chosen to file under chapter 7. I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each chapter, and choose to proceed under chapter 7.



[Only include if petitioner is a corporation, partnership or limited liability company] --

I hereby further declare under penalty of perjury that I have been authorized to file the petition, lists, statements, and schedules on behalf of the debtor in this case.

Date: 3/31/2020

/s/ David Austin Hardwick

David Austin Hardwick
Debtor

Soc. Sec. No. xxx-xx-6553

/s/ Charissa Danee Hardwick

Charissa Danee Hardwick
Joint Debtor

Soc. Sec. No. xxx-xx-5908

PART II: DECLARATION OF ATTORNEY:

I declare UNDER PENALTY OF PERJURY that: (1) I will give the debtor(s) a copy of all documents referenced by Part I herein which are filed with the United States Bankruptcy Court; and (2) I have informed the debtor(s), if an individual with primarily consumer debts, that he or she may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

Date: 3/31/2020

/s/ David S. Kohm

David S. Kohm, Attorney for Debtor

David S Kohm

1414 W. Randol Mill Rd., Suite 118

Arlington, TX 76012

Email: michaelb@attorneykohm.com

Phone: (817) 861-8400 / Fax: (817) 861-8900